

COMMISSIONER FOR PATENTS
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION

Date: July 23, 2003
File No. 2312.67544

Sir:

Transmitted herewith for filing is the patent application of
Inventor(s): McKendry et al.

For: ADAPTER FOR HUMAN BREAST PUMPS

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

July 23, 2003
Date

David Corcoran
Express Mail Label No.: EV032730893US

Enclosed are:

(X) 11 pages of specification, including 7 claims and an abstract.
(X) an executed oath or declaration, with power of attorney.
() an unexecuted oath or declaration, with power of attorney.
(X) 7 sheet(s) of informal drawing(s).
() sheet(s) of formal drawings(s).
(X) Assignment(s) of the invention to L. JASON CLUTE and Assignment Cover Sheet.
(X) A check in the amount of \$40.00 to cover the fee for recording the assignment(s).
() Information Disclosure Statement, Form PTO-1449 and cited references.
() Claim for Priority and Priority Document.

16235 U.S. PTO
10/625246
07/23/03

Fee Calculation For Claims As Filed

a) Basic Fee	\$ 750.00
b) Independent Claims	<u>1</u> - 3 = <u>0</u> x \$ 84.00 = \$ _____
c) Total Claims	<u>7</u> - 20 = <u>0</u> x \$ 18.00 = \$ _____
d) Fee for Multiple Dependent Claims	\$ 280.00 = \$ _____
	Total Filing Fee \$ <u>750.00</u>

(X) Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$ 375.00
(X) A check in the amount of \$375.00 to cover the filing fee is enclosed.
() Charge \$ _____ to Deposit Account No. 07-2069.
() Other _____.
() The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069.
A duplicate copy of this sheet is enclosed.

Respectfully submitted,

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